## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

9/674468

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TC	TAL CLAIMS						Г	RATE	FEE	<b>)</b>	RATE	FEE
FO	R		NUMBER FILED		NUMBER EXTRA			BASIC FEE	500	OR	BASIC FEE	500
то	TAL CHARGEA	BLE CLAIMS	/ min	us 20=	*			X\$ 9=		OR	X\$18=	
IND	EPENDENT CL	AIMS	/ mii	nus 3 =	*		<b>i</b> i	X40=			X80=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT						OR			
* If	the difference	in column 1 is	less than zero; enter "0" in co			olumn <sub>•</sub> 2	L	+135=	240	OR	+270=	
C	No Lla	Vd. KK	ya I tel amendani IMENDEDI PARTII				nt-	TOTAL	200	OR	TOTAL	THAM
		(Column 1)	(Column 2)			(Column 3)	<u>)                                    </u>	SMALL	ENTITY	OR	OTHER SMALL I	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	IEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	•	Minus			=	] [	X40=		OR	X80=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDEN	T CLAIM		┛┇	+135=		OR	+270=	
TOTAL											TOTAL	
(Column 1) (Column 2) (Column 3)								NDDIT. FEE		1011	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	1 [	X\$ 9=		OR	X\$18=	
	Independent	•	Minus	***		=	]	X40=			X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPE				CLAIM		╛┞			OR		
							L	+135= TOTAL		OR	+270= TOTAL	
ADDIT. FEE ADDIT. FE											ADDIT. FEE	
		(Column 1) CLAIMS	2 1 d 1 or 224	(Colu		(Column 3)	) T _			,		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	BER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	•	Minus	**		=	]	X\$ 9=		OR	X\$18=	
	Independent	,	Minus	***	T O1 A144	=	┧┟	X40=	*** • ***	OR	X80=	
	PIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		┙┟	+135=			+270≃	
• If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR OR	TOTAL	
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "20."  ADDIT. FEE ADDI											<u> </u>	
	THE THYRESTINUIT	ibel i leviously Fa	is for (Total O	mospenc	iein <i>j</i> 15 tile	ringriest numb	e ioul	м игине арр	лорпаке вох	CHI CO	iumm 1.	